

# IMMIGRANTS AND REFLIGEES:



## THE INTERSECTION OF MIGRATION AND CHILD WELFARE

Immigrant families and children represent 12% of the total population in the United States; one-fifth of all children in the U.S. have at least one foreignborn parent. Migration and acculturation involve stress, loss, isolation, and uncertainty. While differences in language, culture, and tradition are often strengths and sources of resilience, they can also present barriers to needed resources. Child welfare service providers are faced with many challenges in addressing the special needs of immigrant families, children, and youth. In this article, adapted from a webcast conversation, Dr. Ilze Earner and Dr. Alan Dettlaff discuss promising practices, emerging issues, and available resources. View the full interview at <a href="http://www.hunter.cuny.edu/socwork/nrcfcpp/webcasts/index.html">http://www.hunter.cuny.edu/socwork/nrcfcpp/webcasts/index.html</a>.

#### PROGRESS IN RECENT YEARS

**Dr. Earner:** Ten years ago, when I first started working with immigrant families, children, and youth involved in the child welfare system, I was a program director of an agency providing child welfare services. The cases were very complex, there were few resources, there was no one to turn to, and it often seemed like there was not much we could do. In the intervening period, I have seen greater attention paid to the special needs of immigrant families, children, and youth. The first conference that we had in New York City in 2001, hosted by Andrew White at the New School University, brought together the advocate community and representatives from the New York City child welfare system. The outcome was very successful; in the intervening years, we saw the development of an approach to addressing the issues that these families brought to service providers, the development of a training curriculum and a handbook, and the creation of an advisory panel that works within the New York City child welfare system. In that process, we began to network. One of the earliest organizations involved in providing services to immigrant populations was BRYCS (Bridging Refugee Youth and Children Services), which addressed the unique issues refugee families brought to the attention of service providers. We also now have the Migration and Child Welfare National Network, a new entity bringing together groups across the country to look at this issue, including the training and technical assistance needs of providers, and to engage in research to understand the problems. Alan was involved in the Migration and Child Welfare National Network from the very beginning.

**Dr. Dettlaff:** As you said, ten years ago, there really wasn't a national conversation about migration and the child welfare system. That national conversation really began through the leadership of the American Humane Association and faculty at Loyola University Chicago. Back in 2005, Sonia Valazquez, the Vice President at the Children's Division at the American Humane Association, and Maria Vidal, faculty at Loyola University Chicago, began a conversation about the need for more attention to be paid to immigrant children and families involved in the child welfare system. They came up with the idea to hold a national roundtable to bring together practitioners, administrators, policy makers, legal professionals - all the stakeholders groups involved in serving immigrant families in the child welfare system. That roundtable was held in July 2006 with the purpose of beginning a dialogue. Out of that dialogue, four emerging issues were identified that needed increased attention from child welfare systems and other stakeholder groups: research on immigrant children and families that come to the attention of the system, policy for immigrant children and families involved in the system, best practices or promising practices for those children, and developing transnational collaborations. The network has developed subcommittees of experts to address each of those priority areas.

#### **RESEARCH CHALLENGES**

**Dr. Earner:** You and I are both on the Research Committee. Research is an academic term, but it has a practical application because it speaks to the state of our knowledge about the issues that immigrant children and families have and that service providers are put into position to address.

**Dr. Dettlaff:** While there is a growing body of knowledge about the needs and experiences of immigrant children and families in the general population, the population of children who come to the attention of the child welfare system is different. Research specific to the needs and experiences of immigrant children and families involved in the child welfare system is very limited right now, primarily because data on the immigration status or the country of origin of parents is not collected uniformly at a local, state, or national level. There are significant reasons for that, in terms of confidentiality, but it leads to barriers to research knowledge and to demonstrating the need for further research. Research about child welfare populations is often done by accessing state and national data sets. That data can't be obtained right now, because we can't identify which children in the child welfare system are immigrants and/or are children of immigrants. But, because the cases of immigrant children and families are so complex and have so many needs, the need for that research is great. We don't know how many immigrant children and families are involved in the child welfare system, the unique risk factors that propel them to the attention of the child welfare system, and once in the child welfare system, we don't know what services best promote positive outcomes. Because the immigrant population has unique experiences and stressors, we need more information about practices that meet the needs of that population.

#### EXPERIENCES AND NEEDS OF IMMIGRANT FAMILIES

**Dr. Earner:** It is interesting to put the special needs of immigrant children and families in the context of research, because we don't really know what they are, though we know that they exist. We identified the issue of language, which is probably the foremost unique characteristic of immigrant populations. Often families don't speak English, or parents don't speak English very well. You may not have adequate staff who speak the language of the immigrant populations that you are mandated to serve. How do you intervene, assess, and develop a service plan with a family you can't easily communicate with? We also identified culture. People come from different places in the world where there are very different cultures, including different dynamics within families and family roles, and differences in terms of what is considered appropriate discipline. The most complicated factor is immigration status. Immigration status is a [direct] barrier to services and a barrier to services in terms of caseworkers' understanding of immigration status. This understanding is paramount to developing service plans. In recent years, we have seen growing attention to other issues related to immigration, including the process of migration. Migration is often traumatic. [Often], the entire family doesn't come across the border at the same time - parents come first, leaving minor children behind, and then children are reunified with their families later. That changes dynamics within families and creates a lot of stress. The newest conceptualization of special need is the phenomena of transnational families. We're recognizing that immigrants maintain close connections with family members on the other side of the border, ocean, or world. How do you assess family ties that are across borders? This can be very important in looking at possible kinship placement of children or reunifying children with family members.

Dr. Dettlaff: Related to that is growing recognition of the need to understand the process of acculturation - the adjustment period to a new culture that all immigrants experience [regardless of immigration status]. Research on general immigrant populations shows that immigrant children and families often experience a great deal of stress resulting from acculturation; some research shows that stress is related to increases in domestic violence, substance use, marital problems, or problems between children and parents. That stress can be significant and can be [related to] factors that bring children to the attention of the child welfare system. Children often acculturate faster than their parents, which can lead to challenges between children adjusting to their new culture in the U.S. and the family values that their parents retain. Often, children learn English faster than their parents. That can create problems between children and their parents. Assessment is key to developing interventions for children and families. If stress from acculturation or migration brings the family to the attention of the child welfare system, then that issue really needs to be explored through the assessment process.

### RESOURCES AND PROMISING PRACTICES

**Dr. Earner:** Let's take a look at promising practices coming out of assessment and how you develop a service plan. When you develop a service plan, you have to be able to implement it; [yet many] issues can prevent implementation. You can develop what looks like an absolutely brilliant service plan [but if it doesn't take into account immigration status, the parent may be unable to fulfill it]. Start with training staff to understand immigration status - what immigration means, how it impacts ability to access services and benefits. Training has to help staff move away from understanding immigration status as a duality - you are either legal, or you are not. That duality doesn't exist in the real world. There are multiple variations and lots of gray areas. People can change their immigration status. There are mixed status families, where not everyone in the family has the same status. How do you begin to develop a service plan to meet the needs of that family? It is extremely complicated. There are conflicting mandates between child welfare and some state and federal legislation, so we don't have clear guidelines. I think the keys to culturally competent practice are building understanding immigration status into staff training and developing collaborative relationships with community-based service providers. Through these relationships, you can refer families to legal agencies to address immigration status issues and develop cultural liaisons with community-based services providers who can help you understand families from a cultural perspective and the acculturation process. They can often be partners in developing service plans.

**Dr. Dettlaff:** Cultural competence with immigrant families goes well beyond learning about culture, because of their experience of migration and acculturation. Cultural competence with an immigrant family means learning about their culture, and also understanding what it is like to be an immigrant, the process of immigration, how stressful and traumatic it can be, what their reasons for migration were, and the ways acculturation and migration impact family dynamics. Part of cultural competency training should be about understanding and identifying strengths that families possess that we can build upon that may overcome some of the factors causing stress within the family.

**Dr. Earner:** Yes, I agree. I also want to share examples of promising practices that can be implemented by organizations, states, and local child welfare agencies. New York City offers some cost-effective and unique promising practices. Coming out of the work of the advocate community in collaboration with the public child welfare agency, a handbook was developed that gave caseworkers a field guide to identifying immigration status, understanding the implications of immigration status, understanding language access issues, and accessing resources within the community; it provided guidelines on how to work effectively with immigrant families. New York City also put together an advisory panel bringing together members of the immigrant community and community-based organizations to regularly meet with public child welfare to discuss training and service needs and [to identify and address] challenges. Los Angeles County has a unit in child welfare specifically looking at the issues of immigrant youth in the foster care system. The 6

issues of immigration status affecting youth in foster care are not regularly assessed when a child comes into care. In Los Angeles County, they have set up a system to do just that. If the child goes into care and is going to stay in care, if that is the permanency plan, that plan has to address their immigration status through the Special Immigrant Juvenile Status Relief. The most tragic thing you could have is someone aging out of foster care and moving into independent living as an undocumented person in this country. There are other forms of immigration relief, not just for youth, but also available to families; these are things that a training agenda can address. Illinois has gone a step beyond in addressing cross-national collaboration.

Dr. Dettlaff: Illinois has a memorandum of understanding with the Mexican consulate. Chicago has the second largest population of Mexican Nationals in the country, so that memorandum of understanding is very important to promoting positive outcomes of safety, permanency, and wellbeing. That memorandum is signed as soon as the agency becomes involved with a child who is a Mexican National, and they work together to promote outcomes of best interest for the child. We've learned in our work through the Migration and Child Welfare National Network, that information [about promising practices] is not disseminated on a national level. There are many people developing promising practices with immigrant populations; yet, their neighbors in the next state don't know about them. Next year our research will look at the current state of policy and practice with immigrant children and families in child welfare agencies throughout the U.S. Until then, where can people go for help?

**Dr. Earner:** BRYCS has a wonderful website [http://www.brycs.org/] with an amazing library of resources, including handbooks on raising children in a foreign country, a parenting curriculum for immigrant parents, and numerous studies on providing services to refugee families. Also, the Migration and Child Welfare National Network is building a website. The American Humane Association also has technical assistance and resources on their website. NRCFCPPP has technical assistance available, and on their website, you can access resources and information. You can also contact Alan (312-996-4629) or me (212-452-7094) and we would be happy to provide you with information or technical assistance or direct you to appropriate resources.

Dr. Ilze Earner, Ph.D., MSW, is an Assistant Professor at the Hunter College School of Social Work. She is the founder and director of the Immigrants and Child Welfare Project. She co-edited a special edition of the Journal of Child Welfare "Immigrant and Refugee Families and Public Child Welfare" published by the Child Welfare League of America in September, 2005. Dr. Earner is a member of the National Child Welfare Advisory Board, the Migration and Child Welfare Network and is a consultant with NRCFCPPP and with BRYCS (Bridging Refugee Youth and Children's Services). Dr. Earner is an immigrant and was born in a refugee camp in France.

Dr. Alan J. Dettlaff, Ph.D., MSW is an Assistant Professor at the Jane Addam College of Social Work, University of Illinois at Chicago. He has worked as practitioner and administrator in public child welfare. He is involved in research about immigrant children and families in the child welfare system and to reduce racial disparities. Dr. Dettlaff is Principal Investigator of a grant designed to educe racial disproportionality in the Texas child welfare system, and is the evaluator of a federal grant from the Administration of Children and Families that provides training to child welfare staff on culturally competent practices. In 2007, Dr. Dettlaff co-edited a special issue of the journal Protecting Children on immigration and child welfare. Dr. Dettlaff provides training and consultation to several state child welfare agencies on cultural competence and promising practices with children of color.

> Resources pertaining to immigration and child welfare, including several mentioned in the interview, are available on the NRCFCPPP website at: http://www.hunter.cuny.edu/socwork/nrcfcpp/info\_services/ immigration-and-child-welfare.html.